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ABSTRACT

The Personnel Preparation Curriculum is a collaborative consultative model for training professionals, including Head Start teachers, parents, and paraprofessionals, to work with families to address the educational needs of children. The activity-based model views families as being in charge, and professionals as partners with parents. Six collaborative consultative skills constitute the body of training: cooperation, consultative time-sharing, conversational instruction, shared expertise, self-evaluation, and collaborative brainstorming. The curriculum was field tested at 36 sites with 230 professionals, including Head Start teachers, and found to be successful on the basis of three positive effects: (1) trainees in the program demonstrated retention of collaborative and consultative working strategies after six months; (2) trainees reflected that they routinely used the research-based knowledge acquired by participating in family-focused activities in their day-to-day professional work with families; and (3) trainees, regardless of discipline or level of experience, indicated they understood the meaning of "shared expertise" and felt comfortable working as partners with parents and family members. (The six session training guide, which contains activity worksheets and projects, is included. Contains 30 references.) (JPB)

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A COLLABORATIVE CONSULTATION MODEL: CHANGING THE WAY HEAD START PREPARES PERSONNEL TO WORK WITH FAMILIES AT SCHOOL, AT HOME AND IN THE COMMUNITY

SIX-SESSION TRAINING GUIDE

ED 423 984

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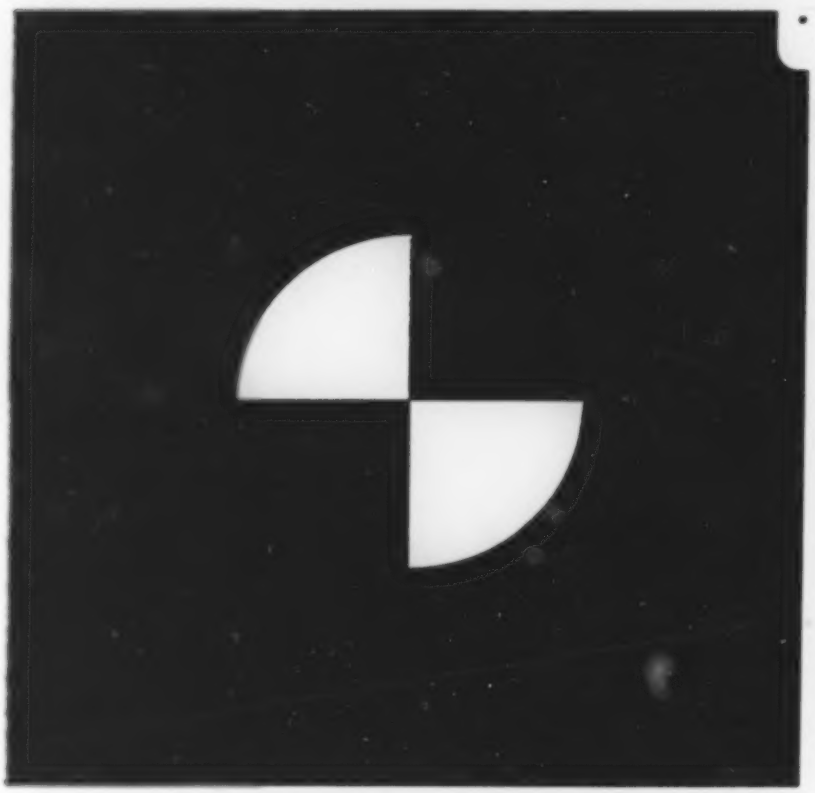

HEAD START FOURTH NATIONAL RESEARCH CONFERENCE
WASHINGTON DC, JULY 9, 1998

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WE NEED TO BEGIN TO VIEW OUR WORK WITH FAMILIES AS A PARTNERSHIP IN WHICH WE ARE CONSULTANTS, BUT THE FAMILIES ARE IN CHARGE

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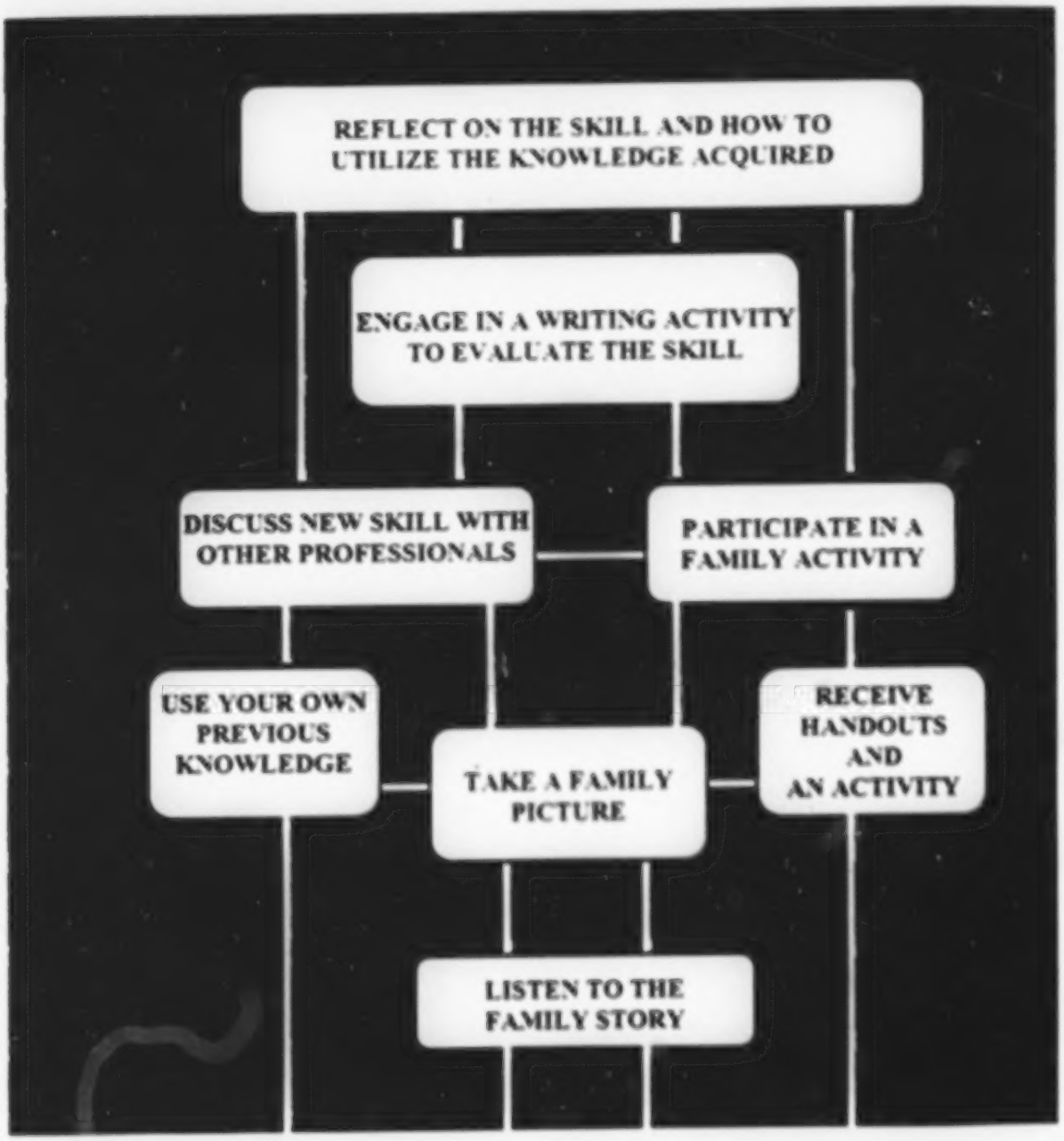
HEAD START STAFF PERSONNEL TRAINING

The Collaborative Consultation Model

Each training activity is designed to move you through a series of skills that enhance your family-centered expertise.


REFLECT ON THE SKILL AND HOW TO UTILIZE THE KNOWLEDGE ACQUIRED
ENGAGE IN A WRITING ACTIVITY TO EVALUATE THE SKILL
DISCUSS NEW SKILL WITH OTHER PROFESSIONALS
PARTICIPATE IN A FAMILY ACTIVITY
USE YOUR OWN PREVIOUS KNOWLEDGE
TAKE A FAMILY PICTURE
RECEIVE HANDOUTS AND AN ACTIVITY
LISTEN TO THE FAMILY STORY
START HERE

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FIVE-STEP PROTOCOL FOR HEAD START PERSONNEL PREPARATION

STEP I. Introducing Co-Trainers

- Co-trainers introduce themselves as parent and teacher duos for an activity that teaches a collaborative consultative skill. The co-trainers briefly describe their experience using each skill and give an example of how they use it.

STEP II. Reading the Family Story

- Co-trainers explain that each session's family-based activity is based on a "real" family who is receiving Head Start services. Co-trainers take turns reading the story aloud, in order to give participants a sense that the story is actually "happening". Handouts focus on family concerns.

STEP III. Taking the Family Picture

- Co-trainers describe the family-focused aspect of each skill. Participants construct a family sculpture or ecological "map". Handouts focus on social policy and family relationships.

STEP IV. Teaching the Skills

- Co-trainers conduct a preset activity, based on family-child concerns and learning style, demonstrating the skill.

STEP V. Reflecting on the Learning:

- Co-trainers and participants jointly write several sentences to briefly share their personal and professional learning.

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STEP 1: NAME OF ACTIVITY: "Crazy Daisies" (A Mobile about family diversity)

STEP 2: FAMILY GOAL: The family/parents need the professionals to gain a greater acceptance of their own unique family configuration, and beyond that, to gain a sense of appreciation of the strengths that are present, despite not fitting the image of the mythical American family.

STEP 3 CONTENT OBJECTIVES: Family Issues, Professional Development

FAMILY DIVERSITY - Need for increased awareness of and sensitivity to the range of contemporary family lifestyle variations and their unique dynamics and needs (E.G.: never married single parent, divorced single parent, blended families, grandparents raising grandchildren, foster parents, cohabiting unmarried parents, gay and lesbian families...).

STEP 4: ACTION STEPS:

1. Co-trainers welcome participants and distribute the curriculum description and handouts for the family story activity. They take turns reading the **TUNYCLIFF Family story** aloud while participants are reading along, using the hard copy of the story provided by the co-trainers.

2. Co-trainers assign participants as family members in each of the above family variations. For example, distribute index cards, each describing a family: blended family: dad, step-mom, 2yr. old daughter, 10 year old son.

3. Participants in each family, group together to assign family roles within their group, according to the type of family that they have been assigned.

4. Co-trainers give each "family" a box of collage materials, as well as sticks and string to create a mobile to represent their family. Each "family" to be encouraged to tap their creativity to create a unique mobile to reflect each individual member in their family, and how they fit together as a family as reflected by the mobile.

5. Co-trainers ask each "family" to share their own mobile with the entire group, describing their process in creating it - have larger group respond to what they are seeing and hearing. Co-trainers point out the uniqueness of individual members, how family balances, etc.

6. After all "families" share their mobile, co-trainers facilitate with the whole group - listing similarities and differences, on a large newsprint, among the various types of families. Co-trainers continue to facilitate, emphasizing that all types of families have similarities and commonality, as well as uniqueness.

STEP 4: ACTION STEPS Cont'd

7. "Families" return to working with their family group - brainstorming what they feel are roadblocks for them as a family because of how their type of family might be viewed by professionals.

8. Co-trainer facilitate discussion among the larger group as each family shares their struggles/roadblocks when working with professionals.

9. Finally, each "family" returns to their group to statement a need from professionals as they work with their unique family - We need professionals to ....

10. Co-trainers have each family share their statement with the larger group and summarize the process.

STEP 5: ATTAINMENT OF OBJECTIVES, EVALUATION OF ACTIVITIES:

A. This activity will remind professionals of the reality of the wide range of families that are present in our society, as well as the image of the mythical American family that many still view as the norm or ideal.

B. This activity will provide an opportunity for professionals to feel/experience the uniqueness of a family variation.

C. This activity will challenge professionals to reflect on the similarities/commonalties among all families.

D. This activity will challenge professionals to appreciate the uniqueness and special needs of different family variations.

STEP 6: BARRIERS/OBSTACLES:

A. Participants may have difficulty acknowledging or discussing certain family variations, such as gay and lesbian families, cohabiting unmarried, etc.
B. Some participants may be resistant to the use of art.

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FAMILY STRUCTURE & INTERACTION

What You HEAR Listen For:	What You SEE Observe:	What You SAY Verify:
Family Members **Present vs. Absent** • Who is reported present or included in the family? • Who is reported absent or excluded from the family? **Family Roles** **Assigned vs. Assumed** • Who is the Assigned vs. Assumed: homemaker, chauffeur, organizer, decision-maker, spokes-person, etc.? • Discrepancies between Assigned vs. Assumed Roles • Are Roles Shared or Mutually Exclusive?	**Patterns of Interaction** (adult to adult, adult to child, child to child,) • Observe Eye Contact, Facial Expressions, Body Gestures & Postures for: • Directiveness (control of interaction through verbal & nonverbal behavior; following the lead) • Turn-taking • Responsiveness • Attentiveness	**What was Heard** • Do I understand what you mean about who is part of the family when I say _____?" • " Do I hear a discrepancy between who is assigned and who assumes the role of _____?" **What Was Seen** • " I noticed when you paused and maintained eye contact, your child _____." • " It appears that you direct the situation by doing _____. Is that observation accurate?"

LISTENING - OBSERVING - VERIFYING
PARENTS/CAREGIVERS AND YOUNG CHILDREN TOGETHER

Understanding of the interactional relationship between parents, caregivers and young children requires careful listening (**what we hear**), observation (**what we see**), and verification of verbal and nonverbal information (**what we say**) through sensitive questions, restatements, invitations to expand, and pauses. Care must be taken in identifying specific, objective information free of personal attitudes or feelings. Utilize the following worksheet during the activity as a guide. Make notes of specific behaviors observed or information reported without making judgments about the information communicated. Note how information was or could have been verified through what is said (e.g., questions, restatements, etc.). Remember, further information from families may emerge based on the environment created and upon the extent and type relationship developed. Again, be **specific without embellishment**.

INITIATION VS. RESPONSE

What You HEAR Listen For:	What You SEE Observe:	What You SAY Verify:
Content of Information	• Changes in Eye Contact, Attentiveness, Activity Level, Vocalizations or Verbalizations • Physical Approach/Withdrawal	**What was Heard** • "I heard a pause as if to give an opportunity for turn-taking. Is that correct?" • "I heard you offer choices about ____." **What Was Seen** • " I noticed when you paused and maintained eye contact, your child _____." " It appears that the situation is directed by _____. Is that observation accurate?"

SOURCE: Margo Gibson, Ph.D. (1996)

HEAD START FOURTH NATIONAL RESEARCH CONFERENCE WASHINGTON DC, JULY 9, 1998

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LISTENING - OBSERVATION -VERIFICATION WORKSHEET

Effective communication with families requires careful listening (**what we hear**), observation (**what we see**), and verification (**what we say**) of information obtained through sensitive questions, restatements, invitations to expand and pauses. Care must be taken in identifying specific, objective information free of personal attitudes or feelings. Utilize the following worksheet during the activity as a guide. Make notes of specific behaviors observed or information reported without making judgments about the information communicated. Note how information was or could have been verified through what is said (e.g., questions, restatements, etc.). Remember, further information from families may emerge based on the environment created and upon the extent and type relationship developed. Again, **be specific without embellishment**.

COMMUNICATIVE INTERACTION

What You HEAR Listen For:	What You SEE Observe:	What You SAY Verify:
Talking vs. Not Talking • Amount • Interruptions • Pregnant Pauses • Changes in Tone, Pitch, Fluency (connected vs disconnected) • Pacing of comments, questions and responses • Identification of issues • Idea or solution generation • Negotiation of strategies for solutions	**Nonverbal vs. No Observable Behaviors** • Eye Contact (Between Speaker & Listener) • Facial Expressions (e.g., smile, grimace, opens eyes wide/closes eyes) • Body Gestures (e.g., movement toward or away) and Postures (e.g., slouching, sitting erect, leaning towards/away)	**What was Heard** • "Did I hear you correctly when you said _____?" • "I noticed a change in the (tone, pitch, rate, fluency) of your voice when you talked about _____" **What Was Seen** • " I noticed you do not look at _____ when you/when _____ is talking." • " I noticed a smile on your face as you talked about _____"

NATURE OF THE CONCERN

What You HEAR Listen For:	What You SEE Observe:	What You SAY Verify:
Content vs. Interpretation Information • Specific Details regarding health and development through Family Stories & Examples • Natural History Surrounding the Concern • Source of information • Each person's Perception or Interpretation of the concern • Questions & Responses • Changing the Subject	**Signs of Concern vs. No Concern** • Changes in Facial Expressions while speaking or listening to stated concern(s) • Eye Contact (amount, frequency, type) while listening or speaking about the concern • Body Gestures and Posturing during discussion about the concern(s)	**What was Heard** • " In other words, the concern about your child has to do with _____" • "Tell me more about _____" • "What does it mean when I hear _____" **What Was Seen** • " I noticed a change in your facial expression when _____ was being discussed. Is this a concern?" • " It appeared that every time the mention of _____ was brought up, there was a change in how much eye contact "

SOURCE: Margo Gibson, Ph.D. (1996)

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A Collaborative Consultation Model: Changing The Way Head Start Prepares Personnel to Work with Families at School, at Home and in the Community

Rationale for the project: "We must encourage Head Start to forge partnerships with key community and state institutions...and we must ensure that these partnerships are constantly renewed and recrafted to fit the needs of families..." (Shalala, 1994, p. 8). This edict accompanied the proposed bipartisan reauthorization legislation, creating a broad set of recommendations to be fulfilled by Head Start in the 21st Century.

Partnerships and community collaboration may be examples of what the future Head Start will look like "outside" in communities and neighborhoods, but will Head Start staffers and families also see themselves as competent collaborators and partners "inside" Head Start centers and in families homes? Will they be equipped to employ such consultation strategies as a) consultative scheduling, b) multi-sensory conversational instruction, c) shared expertise, d) child-family evaluation, e) classroom collaborative brainstorming, and f) paired response teaching and learning. Innovative staff development and training methods will be needed, if the answer is to be a resounding "yes!"

Purpose and Background: This research tests the effectivenss of a collaborative consultative training model aimed at Head Start teachers and paraprofessional personnel, as a result of participation in six, ninety minute collaborative consultative training sessions. This activity-based training model grew out of a personnel preparation project, funded by the Ohio Department of Health, Bureau of Early Intervention, to prepare an 18-hour Early Intervention Personnel Verification Curriculum for professionals from 12 disciplines.

The Personnel Preparation Curriculum was successfully field tested at 36 sites with 230 professionals, including Head Start teachers, parents and paraprofessionals. Results indicated three promising and positive effects. First, trainees demonstrated retention of collaborative and consultative working strategies after six months.. Second, participants reflected they routinely used the research-based knowledge acquired by participating in family-focused activities in their day-to-day professional work with families. Third, professionals, regardless of discipline or level of experience, indicated they understood the meaning of "shared expertise" and felt comfortable working as co-partners with parents and family members, instead of feeling as if they were the "experts."

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Personnel Preparation Training Protocol: The collaborative consultation model views families as "being in charge," and teachers, professionals and paraprofessional staff, as "co-partners" with parents. Professionals and paraprofessionals share their expertise with families, but find ways to allow parents to have an equal role in the teaching and learning of their children. This collaborative design has been successful for elementary school programs (Thousand, Villa, Whitcomb & Nevin, 1996.) Early education of handicapped children programs and early intervention programs have also used the model successfully in both home and classroom settings (Turben, 1997.)

Six collaborative consultative skills constitute the body of training. Parent and professional co-trainers teach one collaborative consultative skill at each session:

1. Cooperation
2. Consultative-time sharing
3. Conversational instruction
4. Shared expertise
5. Self-evaluation
6. Collaborative brain-storming.

Conclusion: Diverse staff backgrounds and varied levels of experience present a significant challenge to Head Start administrators, regional trainers, specialists and professionals and paraprofessionals, who are responsible for the training of personnel. Generally, staff members consider most training workshops chores, perhaps because training is generally designed by content area, rather than skills directly related to an individual's skills and strengths.

An activity-based "collaborative consultation" model, skill-based and family centered, appeals to staff because the training answers the question, "What do I get out of it?" They receive resource information they can use in their jobs, and they receive practice in performing six practical skills they are able to reinforce every day. These skills promote self-development, group cooperation and inclusiveness. These traits will become essential if Head Start is to fulfill both the edict and promise that prompted legislators to reauthorize this program.

Head Start Fourth National Research Conference
Washington D.C.
July 9, 1998

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Head Start personnel work with parents as "Partners"

Guidelines for Practice

1. Parents should have the opportunity to be involved in all planning meetings related to children and their families.
2. Plan to give parents ideas that fit within the family's daily routine.
3. Families should be the ultimate decision-makers.
4. Written plans should be easy for families to understand, and flexible enough to allow for frequent changes.

Adapted fromLA SICC PERSONNEL PREPARATION SUBCOMMITTEE, 1991

HEAD START PERSONNEL NEED TO VIEW THEIR WORK WITH FAMILIES AS A PARTNERSHIP IN WHICH THEY ARE CONSULTANTS, AND FAMILIES ARE IN CHARGE.

Adapted from: Barnard, K. Equals in this partnership: Parents of disabled at-risk infants and toddlers speak to professionals. Arlington, VA: Zero To Three / National Center for Clinical Infant Programs.

HEAD START CHECKLIST

Do I really believe that parents are my equal and, in fact, are experts on their child?

Do I show the same respect for the value of parents' time as I do for my own time by educating myself about an individual child and observing each child's strengths?

Do I speak plainly to families and tell parents their child's good points?

Do I have conferences and make visits at times and places that are convenient for the family?

Do I share information with other teachers and professionals to insure that families do not expend unnecessary energy searching for assistance and services?

Adapted from Focal Point, (1987), 2 (2), Research and Training Center, Regional Research Institute for Human Services, Portland State University.

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FAMILY-FOCUSED TEACHING

PHASES OF INTERVIEW:

Key Questions

How do you involve family members in discussions about what they want for their children?

How do you resolve disagreements about educational goals?

How do you identify teaching strategies that have a high probability for success?

What does your "individual plan" look like for each family?

SPEND TIME UNDERSTANDING TEMPERAMENTS OF FAMILY MEMBERS

TEMPERAMENTAL QUALITY	RATING
ACTIVITY LEVEL	High / Low
RHYTHMICITY	Regular / Irregular
DISTRACTIBILITY	Distractible / Not Distractible
APPROACH/WITHDRAWAL	Positive / Negative
ADAPTABILITY	Adaptive / Not Adaptive
ATTENTION SPAN AND PERSISTENCE	Long / Short
INTENSITY OF REACTION	Intense / Mild
THRESHOLD OF RESPONSIVENESS	Low / High
QUALITY OF MOOD	Positive / Negative

Source: Chess & Thomas 1977

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THREE RULES OF THE FAMILY-CENTERED APPROACH

*VOLUNTARY

*FAMILY-DIRECTED

*PROVIDER AS "CONSULTANT"

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HEAD START FOURTH NATIONAL RESEARCH CONFERENCE
WASHINGTON DC, JULY 9, 1998

A COLLABORATIVE CONSULTATION MODEL: CHANGING THE WAY HEAD START PREPARES PERSONNEL TO WORK WITH FAMILIES AT SCHOOL, AT HOME AND IN THE COMMUNITY

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Conversation Focused Instruction

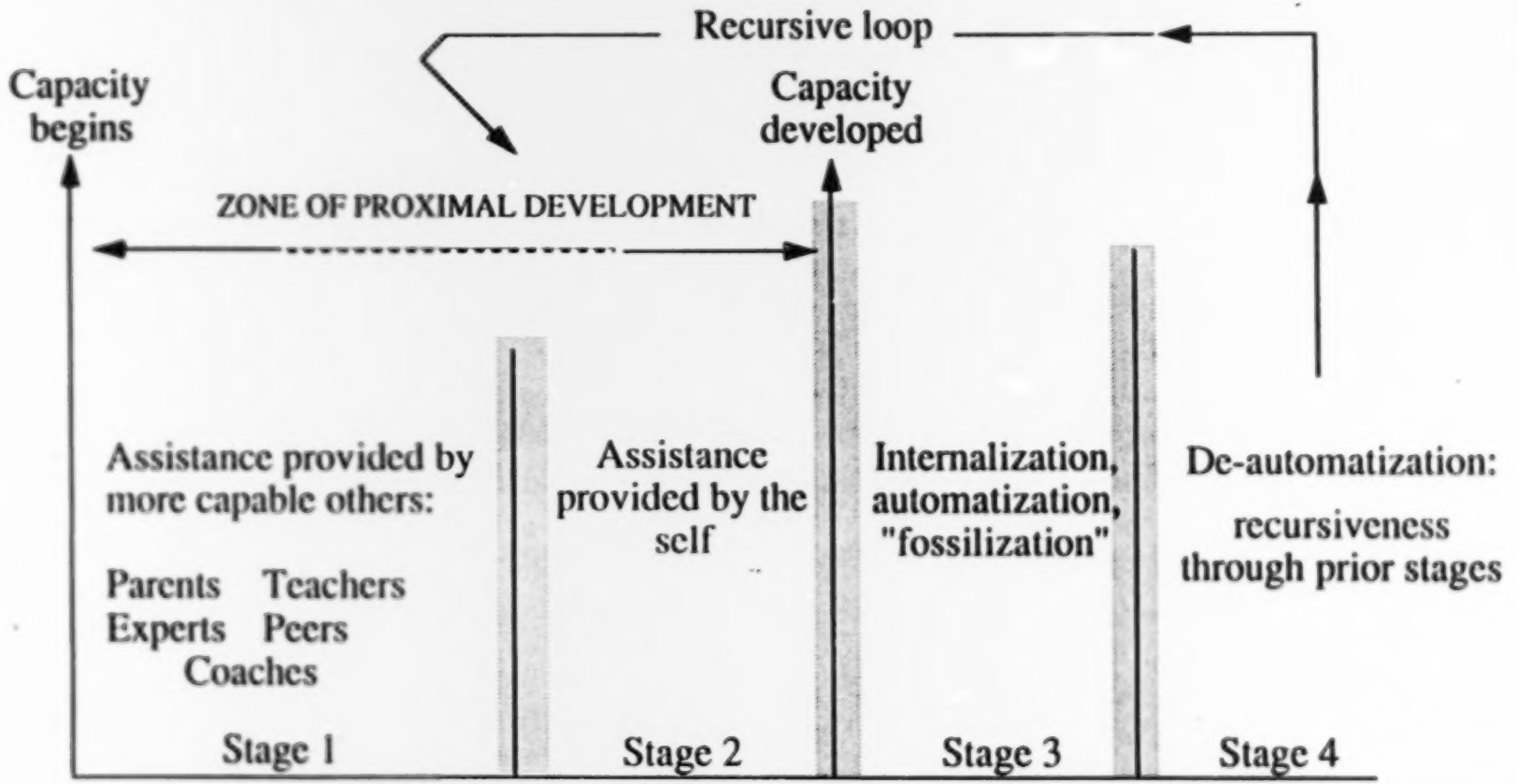

Figure 2.1. Genesis of performance capacity: progression through the ZPD and beyond.

Page 34, Tharp & Gallemore Model:
Rousing Minds to Life

Maccoby & Martin (1983)

MODEL OF PARENTAL STYLES

PARENTAL STYLE	CHILD-CENTERED	ADULT-CENTERED
High Control		
Authoritarian Active	Interactive Let children help	Restrictive Harsh
Cooperative Compliant	Let children talk Self-expressive	Punishing Poor interaction, poor communication
Compromise Reflective	Overprotective Overindulgent	Negligent Lack of protection
Permissive	Inconsistent	Non-interference
Passive	In / Out of control	Non-cooperative, Non-compliant
Low Control		

TECHNIQUES

Time out vs Time away	Keeping your cool vs Losing control	Getting what you want vs Using force

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PARENTAL STRENGTHS ASSESSMENT GUIDE

CHILD'S DAILY ROUTINE	STRENGTHS	ABILITIES	FAMILY NEEDS
Child's Personal-Social Activities			
Child's Self Help Activities			
Child's Physical/Motor Activities			
Child's Communication / Language Activities			
Child's Cognitive and Mental Activities			
Family Members' Comments and Remarks			

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